

INDIANA SHERIFFS' ASSOCIATION SCHOLARSHIP FUND



Post Office Box 19127 Indianapolis, IN 46219

The Indiana Sheriffs' Association Scholarship Fund was established for the purpose of receiving, investing and dispensing of funds to provide college scholarships to qualified students who are committed to pursuing an education and career in the law enforcement field.

The Indiana Sheriffs' Association Scholarship Committee consists of the following members: (2) two sheriffs and (1) one deputy sheriff plus (1) one college or university administrator from each of the four areas of the state. Each member shall be appointed for the term of one year to serve at the pleasure of the president. The committee shall recommend the amount and number of scholarships to be awarded annually. The president of the Indiana Sheriffs' Association shall serve as chairman of the committee and the executive director of the association shall serve as the secretary by virtue of their respective positions. The members of the Indiana Sheriffs' Association Scholarship Committee shall serve as a screening committee in their respective area of the state and the said screening committee shall determine the scholarship recipients from that area.

The state of Indiana shall be divided into four separate areas for the purpose of selecting members of the committee and recipients of the scholarships.

The said scholarship fund was established for the benefit of the members of the association and other qualified individuals. The general qualifications for applicants are: to be an active affiliate or associate member of the Indiana Sheriffs' Association or a dependent child or grandchild of an active affiliate or associate member of the association, be an Indiana resident, attend an Indiana College or University, major in a law enforcement field and enroll as a full-time student (12 hours).

A person who has received a scholarship in a prior year may apply for a renewal of the scholarship for only three successive years. The Indiana Sheriffs' Association Scholarship Committee shall determine the regulations and information required to qualify.

Notification of the available scholarship shall be made by printing such notice in THE INDIANA SHERIFF, an official Indiana Sheriffs' Association publication; through each sheriff's office by news release and by mail to each high school, college and university in the state. Applications shall also be available from any sheriff's office or the association office.

Any person applying for such scholarship shall sign the application form, giving permission to the committee and the association to obtain information from the authorities of the school that the said applicant has previously attended. The information may include, but is not limited to, grade point average, class standing, curriculum of study, extra curricular activities and any evaluation that such authorities may be able to relate to the committee concerning the character and citizenship of the applicant. For more information, call 1-800-622-4779.



INDIANA SHERIFFS' ASSOCIATION, INC.

7215 East 21st Street, Suite E; INDIANAPOLIS, IN 46219 1-800-622-4779



I.S.A. SCHOLARSHIP PROGRAM APPLICATION

The attached form for the Indiana Sheriffs' Association Scholarship Program consists of two parts:

- PART I to be completed by you, the applicant, and signed by you and your parents or guardian. High School students must provide a transcript of high school grades. College students must provide a transcript of college grades.
- PART II to be completed and signed by your high school principal, college registrar or qualified school official.

QUALIFICATIONS

- 1. ALL APPLICANTS MUST BE AN INDIANA RESIDENT.
- 2. ALL APPLICANTS MUST BE COMMITTED TO PURSUING AN EDUCATION AND CAREER IN A LAW ENFORCEMENT FIELD AT AN INDIANA COLLEGE OR UNIVERSITY.
- 3. ALL APPLICANTS MUST BE A CURRENT MEMBER OF THE ASSOCIATION, OR A DEPENDENT CHILD OR GRANDCHILD OF A CURRENT MEMBER OF THE ASSOCIATION. If you do not meet the membership requirement, an application for membership is attached to this application. Just complete the application and return it with this Scholarship Application to meet the requirement.
- 4. ALL APPLICANTS MUST ENROLL AS A FULL-TIME STUDENT (12 hours).
- 5. ALL APPLICANTS MUST HAVE TAKEN THE SCHOLASTIC APTITUDE TEST (SAT) OR THE AMERICAN COLLEGE TEST (ACT).

ALL INFORMATION MUST BE <u>TYPED OR HAND PRINTED</u> <u>NEATLY</u>, COMPLETED IN FULL, AND RETURNED <u>BEFORE</u> <u>APRIL 1</u> TO: Indiana Sheriffs' Association; 7215 E. 21st St., Ste. E; Indianapolis, IN 46219.

PART I–To be completed by the applicant--MUST BE TYPED OR HAND PRINTED NEATLY

Name			
Last	First	Middle	
Home Address Post Office Box or Street			
Post Office Box or Stree	et City .	State ZIP	
Telephone Number ()	Home County	У	
Date of Birth Last	four (4) digits of Social Sec	ourity #	
Name of I.S.A. Member	Relationship to Ap	plicant	
Address of ISA Member		-	
Father's Name	Place of Employment	Position Held	
	Home	Business	
Father's Address	Telephone #	Telephone #	
Mother's Name	Place of Employment	Position Held	
	Home	Business	
Mother's Address	Home Telephone #	Telephone #	
Name of high school you attend(ed)	Year graduate(d)		
School Address			
Street Name of college or university you attend or	City plan to attend	State ZIP	
Field you plan to major in		·	
Number of semesters or quarters completed Semesters		r:	
I am currently enrolled as a senior in high so			
I am currently enrolled in a college/universi Freshman So	ty as a: (circle one)		

1.	Do you reside with your parents? Yes No					
	Parent(s) Name					
2.	List adjusted gross income of parent(s) reported on last I.R.S. tax return \$					
3.	List <u>your</u> (student's) adjusted gross income as reported on last I.R.S. tax return \$					
4. Please list names, ages and relationships of dependents in your immediate househol						
	Name Age Relationship Name Age Relationship					
5.	Number of household members (other than yourself) that are full-time college students					
6. What methods do you plan to use to finance your college education?						
7.	Please list any special awards or recognition you have received for scholarships or other scholastic oriented achievements.					
8.	. Please list any hobbies or leisure-time activities that are of interest to you and any special recognition you may have received from these activities.					
9.	Please list your principal high school and/or college clubs, organizations, activities and any offices or positions held.					
	Activity Office/Position Years Held					

	Activity	Office/Positi	on	Years Held
		l summer employment. List n Duties	Par	t-time/Summer (Specif
		ested for any alcohol or drug r	related offenses	s?
	Have you ever received Amount \$	an I.S.A. Scholarship? Yes Year(s) received	3	No
		nt our scholarship program? (
	Have you attended the I	.S.A. Youth Leadership Camp	p? Yes	No
	(a) your propose(b) how you read(c) what you exp	aper, please write a short essed course of college study, when this decision, eect to gain from college, I goals and ambitions	say on: (Must	complete #16)
	Be thoughtful in develor motivations and persona	ping your essay. The essay is al characteristics to members	your opportur	nity to convey your on Committee.
		grades <u>must</u> be mailed with app and College students are to provi		
ie ai nc	ve myself eligible for the Ind ned in this application is com ial aid office or qualified sch records to the Selection Con	liana Sheriffs' Association Scholar uplete and true. I authorize my hig ool official to complete the remain mmittee of the Indiana Sheriffs' As ne Selection Committee in the selection	ship Program and h school principa der of this form a sociation Scholar	l certify that all information l, or the office of registrar, and forward the required ship Program.
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PART II – To be completed by the High School Principal, College Registrar or Qualified School Official -- MUST BE TYPED OR HAND PRINTED NEATLY

TO THE SCHOOL OFFICIAL:

The Indiana Sheriffs' Association Scholarship Program is designed to recognize the academic achievements and total development of high school seniors and/or college students. Applicants are competing for a \$500 I.S.A. scholarship from within their area of the state.

In order to best evaluate the applicant, the Selection Committee needs information from you. It is hoped your comments will be complete and thoughtful in order to provide the Committee with a total picture of the applicant.

IF YOU FEEL THAT YOU, AS THE HIGH SCHOOL PRINCIPAL OR COLLEGE REGISTRAR, DO NOT KNOW THE APPLICANT WELL, THE FOLLOWING INFORMATION MAY BE PREPARED AND SUBMITTED BY ANOTHER QUALIFIED SCHOOL OFFICIAL. THANK YOU FOR YOUR HELP AND COOPERATION.

1.	This student ranks in a class of students at the				
	end ofsemesters.				
2.	This student's GPA is on a scale of				
3.	This student took the Scholastic Aptitude Test (SAT) or the American College Test (ACT)				
	on Please indicate scores achieved: Verbal Math				
4.	Attached is the transcript of the student's high school records for semesters or				
	college transcript for semesters.				
5.	List student's attendance record				
	If the information is not included on the transcript, please indicate:				
	Passing Grade Grade recommended for college work				
	Type of course taken (General, College Preparatory, etc.)				

•	Please use the space below to give the Your comments should include an ap leadership ability, extra-curricular ac	praisal of the student's schola	stic achievemer	ıts,
Vam	e of School		······································	
chc	ool's Address Street	City	State	ZIP
ou	r Name	Position		
ou:	r Signature	Date		1.17
	L INFORMATION MUST BE TYPE	מונא אווי מונאין אינו אווי אווי אווי אווי אווי אווי אווי		

INDIANA SHERIFFS' ASSOCIATION

YOUR
PROFESSIONAL
ORGANIZATION





BECOME A MEMBER TODAY

INDIANA SHERIFFS' ASSOCIATION ASSOCIATE MEMBERSHIP APPLICATION

I am enclosing my annual Associate	Membership Dues	(A such a sin n sin hair a sa h		\$ 24.00
I am enclosing our Associate Family	rship card, two I.S.A. star decals and releases of y Dues (Includes primary member & s	our newsletter, THE INDIANA SE	IERIFF)	\$35.00
Spouse's Name				
*Unmarried dependent children ov	er 14 days and under 19 years			
(Available through Family Membe	rship Only)			
(Family membership credentials consist of a SHERIFF, per family)	a membership card per member; three I.S.A. sta	r decals per family, and releases of	our newsletter, THE II	NDIANA
In addition to my dues, please send me #	membership license tags @ \$5	ni kalin ki ki kapu ni kapi ki kana kapi wa kapi ili ka kapi ki kapi ka kapi ka kapi ka kapi ka kapi ka kapi k	******	\$
Please use the following amount to assist the	e Indiana Sheriffs' Scholarship Fund	*******************************	******************	\$
	Youth Leadership	Camp		\$
	Training Fund			\$
		ED		
Name of Applicant				
Address	City	State	Zip	
County	Dues and contributions to the Indi	ana Sheriffs' Association are tax dedu-		the LR.S. Code
Please make check payable to INDIANA SHERIFFS' AS	SOCIATION, Mail to: 7215 E. 21st St., Ste. E, Indianapolis, IN	46219, Telephone 1-800-622-4779		

SUPPORT YOUR SHERIFF'S DEPARTMENT

If you are applying for a scholarship and do not meet the membership requirement, you can use this application to apply for membership. Just complete the application and return with the Scholarship Application.